P1700038653

(Re	questor's Name)	
(Ad	dress)	
(Åd	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

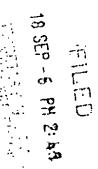
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June

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: HANA	AL FARMS	INC
DOCUMENT NUMB	er: <u> </u>	00038653	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma		
-	KAMON K 5035 HIALE	Address Address City/ State and Zip Code	INTING INC
For further information	concerning this matter, pleas	se call:	
<u>AAM</u>	on heyes	at (<u>305</u> Area Co) <u>822 – 066 9</u> de & Daytime Telephone Number
	the following amount made		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis	ing Address Indment Section Indicate the section of Corporations Indicate the section of Corporations Indicate the section of Corporation of	Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

to

Articles of Incorporation

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HANAC FARMS INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
P17000038653
(Document Number of Corporation (if known)
resuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) Articles of Incorporation:
If amending name, enter the new name of the corporation:
The new
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS The must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the bord "chartered," "professional association," or the abbreviation "P.A." [Enter new principal office address, if applicable: [Principal office address MUST BE A STREET ADDRESS] [HIALEAG, FL 33013]
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 670 E. 65 5 5 HIALEAG, FL 33013
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent AKELIN CANETA 100
New Registered Office Address: HIALEAG, City) . Florida 33013
ew Registered Agent's Signature, if changing Registered Agent: bereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Cacaco Signature of New Registered Agent, if changing
where it is a fundament is a second of second of

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P YAKELIN CANEJA	670 E. 65th HIALEAG, Fl. 33013
Add		HIALEAG, FL. 33013
Remove		
2) Change	P ANTONIO R. QUINONEZ	2731 5.W. 140 AVE MIAMI, Fl. 33175
Add		1.10.1001, 11. 32.
Remove 3) Change		
Add		48.00
Remove		
4) Change		
Add		
Remove		
5) Change		<u> </u>
Add		
Remove		
6) Change		
Add		
Remove		

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ied <u>shares.</u> tself:

The date of each amendment(s) adoption: $\frac{09/01/18}{}$ if other than the
date this document was signed.
Effective date if applicable: 09/01/18
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated09/01/18
Signature
(By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Val. 1
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)